PTO/SB/17 (01-06)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Complete if Known			
				Application Number 10/589,276			
				Filing Date		August 10, 2006	
For FY 2006			First Named Inv		ERICH WANK		
X Applicant claims small entity status. See 37 CFR 1.27				Examiner Name	•		
				Art Unit			
TOTAL AMOUNT OF PAYMENT (\$) 600.00				Attorney Docket	t No. (009848-035619	3
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
X Deposit Account Deposit Account Number: 033975 Deposit Account Name: PILLSBURY WINTHROP SHAW PITTMAN LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Y Charge any additional fee(s) or underpayments of fee(s)							
war 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FILING FEES SEARCH FEES EXAMINATION FEES							
Application Type	Fee (\$)		ee (\$)	Small Entity Fee (\$)	Fee (Small Entity 5) Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES Small Entity							
Fee Description Each claim over 20 (including Reissues)						<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims						<u>Multiple Dep</u>	endent Claims
21 - 20 or HP = 1 x 25.00 = 25.00 HP = highest number of total claims paid for, if greater than 20.						Fee (\$)	Fee Paid (\$)
Indep. Claims	Extra Clain		Fee F	Paid (\$)			
$\frac{1}{1}$ - 3 or HP = $\frac{1}{0}$ x = $\frac{1}{0}$ = $\frac{1}{0}$							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof 125.00 = Fee (\$) Fee Paid (\$)							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)							
Other (e.g., late filing surcharge): Surcharge & Extension Fees 575.00							
UBMITTED BY							
ignature	///////	1// /		egistration No.	4349	28 Telephone	959 500 4065
(Attorney/Agent) 43468 058.309.4065							
nis collection of information is re		TD 1 126 Th - 16 - 18		at a day to the		Sale Se	eptember 4, 2007

This collection of information is required by 37 CFR 1.136. The formation is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.